






July 5, 1984

Employee Activity Assoc. Inc.
P O Box 241
McLean, Va. 22101

Gentlemen:

We are in receipt of your recent request for a MasterCard and/or Visa account.


The application you completed does not request the necessary information needed for business accounts. I have marked below the required information and forms to be completed.

 _____	Application to be filled out on company and signed by authorized person to borrow.
 _____	Personal application filled out by authorized person to borrow and a signed guaranty agreement.
 _____	Borrowing resolution.
 _____	Financial statement.
 _____	Application(s) for all other parties (if any) wanting cards in their name. The top portion should be completed (name, address, social security #). The application should be signed by the user and the person authorized to borrow.

Please return this information in the enclosed envelope to insure prompt attention.

If you have any questions, please do not hesitate to contact our office.

804-858-4209
Sincerely


(Mrs.) I. Carter
Credit Analyst

Enclosure

810/068 rb

VISA AND MASTERCARD APPLICATION**SOVRAN BANK, N. A.**

An annual fee of \$15 will be charged for each account opened.

I/We desire a Sovran Bank:

VISA CREDIT LIMIT DESERED \$600 ____ \$800 ____ \$1,000 ____ Other ____

MASTERCARD CREDIT LIMIT DESIRED \$600 ____ \$800 ____ \$1,000 ____ Other ____

MY/OUR CURRENT MASTERCARD NO. IS # _____

MY/OUR CURRENT VISA CARD NO. IS # _____

MY CASH FLOW CARD NO. IS # _____

APPLICANT

MY CASH FLOW CARD NO. IS # _____

CO-APPLICANT

BANK USE ONLY

SOURCE ____ VISA C/L ____ MC C/L ____

CPS

NO. CARDS VISA ____ MC ____ CYCLE ____ EXP. ____

MER # ____ AMT. ____

P/O # ____ CIF # ____

OFC # ____ INT. ____

FIRST NAME	INITIAL	LAST	DATE OF BIRTH	
SOCIAL SECURITY #		PHONE #	NO. OF DEPENDENTS	
STREET ADDRESS			CITY	
STATE	ZIP		HOW LONG THERE YRS. MOS.	
OWN/BUYING \$ MO.	RENT PAYMENT \$ MO.	OTHER (SPECIFY)	NAME OF LANDLORD OR MORTGAGE CO.	
FORMER STREET ADDRESS	CITY	STATE	ZIP	HOW LONG THERE YRS. MOS.
PERMANENT U.S. RESIDENT <input type="checkbox"/> YES <input type="checkbox"/> NO			IF NOT, IMMIGRATION STATUS	
NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	
STREET ADDRESS	CITY	STATE	ZIP	
PRESENT EMPLOYER — IF MILITARY INDICATE BRANCH/ESTIMATED TIME OF SEPARATION				
STREET ADDRESS	CITY	STATE	ZIP	
POSITION (RANK/RATE/PAY GRADE)			HOW LONG YRS. MO.	
AREA CODE + PH. NO. ()	SALARY \$ MO.	*OTHER INCOME \$ MO.	SOURCE	
*YOU NEED NOT REVEAL INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THE CREDIT REQUESTED.				
YOUR BANK NAME — LOCATION	STREET ADDRESS	CITY	STATE	ZIP
CHECKING ACCOUNT NO.	SAVINGS ACCOUNT NO.			
CAR/MAKE	YEAR	FINANCED BY	MONTHLY PAYMENT \$ @ MO.	
CREDIT UNION REFERENCE (NAME CREDIT UNION)				
RELATIONSHIP	<input type="checkbox"/> SAVINGS <input type="checkbox"/> LOAN		MONTHLY LOAN PAYMENT \$	
HAS EITHER APPLICANT EVER BEEN ADJUDGED A BANKRUPT OR HAVE ANY JUDGMENTS, REPOSSESSIONS, GARNISHMENTS OR OTHER LEGAL PROCEEDINGS EVER BEEN FILED AGAINST YOU? YES <input type="checkbox"/> NO <input type="checkbox"/>				
*LIST ALL DEBTS OF APPLICANT & CO-APPLICANT (IF NONE OWING LIST PAID ACCOUNTS FOR REFERENCE. ATTACH SHEET IF MORE SPACE IS REQUIRED)				
REFERENCES NAME AND ADDRESS	OPENING DATE MO./YR.	COMPLETE ACCT. #	BALANCE AMT.	MONTHLY PAYMENT
	/		\$	\$
	/		\$	\$
	/		\$	\$
IF CO-APPLICATION, PLEASE COMPLETE BELOW:		IF YOU WISH US TO CONSIDER INFORMATION IN ADDITION TO THAT LISTED BELOW, ATTACH A SEPARATE SHEET OR COMPLETE A SEPARATE APPLICATION.		
LAST NAME	FIRST NAME	INITIAL	DATE OF BIRTH	SOCIAL SECURITY #
STREET ADDRESS	CITY	STATE	ZIP	PHONE #
RELATIONSHIP TO APPLICANT <input type="checkbox"/> SPOUSE <input type="checkbox"/> OTHER	SPECIFY		EMPLOYER	INCOME
EMPLOYER STREET ADDRESS	CITY	STATE	ZIP	PHONE #
NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	
STREET ADDRESS	CITY	STATE	ZIP	

PLEASE READ CAREFULLY BEFORE SIGNING: THE UNDERSIGNED CERTIFY THAT THE FOREGOING INFORMATION HAS BEEN SUPPLIED TRUTHFULLY, ACCURATELY AND VOLUNTARILY AND AUTHORIZE SOVRAN BANK, N. A. (BANK) TO INVESTIGATE MY/OUR EMPLOYMENT, CREDIT WORTHINESS, CREDIT HISTORY AND FINANCIAL RESPONSIBILITY THROUGH EMPLOYER(S) OR CREDIT BUREAU(S) OR BY ANY OTHER REASONABLE MEANS, INCLUDING DIRECT CONTACT WITH PAST AND PRESENT EMPLOYER(S) AND CREDITORS. THE UNDERSIGNED ALSO AUTHORIZE BANKS AND OTHER FINANCIAL INSTITUTIONS TO GIVE INFORMATION TO THIS BANK, AND AUTHORIZE THIS BANK TO RETAIN THIS APPLICATION AS ITS PROPERTY. THE UNDERSIGNED AGREE TO ABIDE BY THE SOVRAN BANK MASTERCARD OR VISA RULES, REGULATIONS AND OPERATING PROCEDURES, INCLUDING THE OBLIGATION TO PAY AN ANNUAL FEE OF \$15.00 ON EACH ACCOUNT OPENED IN MY/OUR NAME(S).

SIGNATURE OF APPLICANT

DATE

Approved For Release 2005/06/22 : CIA-RDP85-00375R000400050001-3

SIGNATURE OF CO-APPLICANT

DATE

Approved For Release 2005/06/22 : CIA-RDP85-00375R00040001-9

EITHER CARD.

Some banks offer only MasterCard, others only Visa. Sovran Bank offers both. And with this application you can get the card of your choice fast and easy.

All the Credit Cards You'll Ever Need. Both cards are good for instant credit. And for an on-the-spot loan of \$50 or more, up to your credit limit, at any participating bank in the world (and at any Cash Flow[®] teller in the state). If you've got Ready Reserve checking with Sovran Bank, you can even exceed your checking account balance, up to your credit limit, and we'll transfer money in amounts of \$100 to your Sovran Bank checking account. Applications for Ready Reserve checking can be picked up at Sovran Bank.

Apply Now. Even if You Don't Have An Account With Us. This application is postage paid. So take a minute to fill it out and drop it in the mail. It's the easiest way going to get all the credit cards you'll ever need.



BUSINESS REPLY MAIL

POSTAGE WILL BE PAID BY ADDRESSEE

SOVRAN BANK, N. A.

P. O. Box 1429

Norfolk VA 23501

ATTN I. CARTER



PICK A CARD.

SOVRAN[™]
BANK N.A.



VIRGINIA NATIONAL BANK

BORROWING RESOLUTION OF CORPORATION

Resolved that any one or more of the officers of the corporation signing in the following manner:

are authorized, to borrow money, discount bills receivable or negotiable paper, or obtain credit for the corporation from VIRGINIA NATIONAL BANK upon such terms and conditions as they (he) in their (his) discretion may deem advisable, and to make, execute and/or endorse and deliver any notes, drafts, acceptances, agreements or any other obligations of the corporation, and as security therefor, to mortgage, pledge, hypothecate, grant security interests in, and/or otherwise encumber any stocks, bonds, bills receivable, bills of lading, warehouse receipts or other instruments or property, real or personal, of the corporation, and to execute and deliver any and all endorsements, instruments of assignments and/or transfer, powers of attorney, mortgages, deeds of trust, security agreements and/or other documents as may be necessary or required in connection therewith; and be it further

Resolved that all notes and/or other obligations of this corporation heretofore delivered to said VIRGINIA NATIONAL BANK, evidencing advances or loans to this corporation and/or security therefor, be and the same are hereby in all respects ratified, approved and confirmed; and be it further

Resolved that these resolutions shall remain in full force and effect, and said VIRGINIA NATIONAL BANK shall be entitled to conclusively rely thereon, until written notice of their revocation shall have been duly received by said VIRGINIA NATIONAL BANK.

I Hereby Certify, that I am Secretary of _____

_____ a corporation organized and existing under and pursuant to the laws of the State of _____.

I Further Certify, that at a meeting of the Board of Directors of said corporation, duly called and held at _____ on the _____ day of _____, 19____ and at which a quorum was present and acting throughout, the foregoing resolutions were duly adopted and are now in full force and effect.

I Further Certify that said resolutions are not inconsistent with our By-Laws, and that the following are the names and official designations of the officers of the corporation:

Name	Office
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

In Witness Whereof, I have hereunto set my hand as Secretary of said corporation and affixed its corporate seal this _____ day of _____, 19____.

(Seal)

Secretary

I, President of _____, do hereby certify that on the _____ day of _____, 19____, _____, who signed and attested the foregoing resolutions, was and now is the duly qualified and acting Secretary of said corporation, and that he was and is duly authorized by the By-Laws to certify to the proceedings of the Board of Directors of said corporation and to affix its corporate seal to such certificate.

Date _____

President



☐ MASTERCARD ☐ VISA

(Check One or Both if Applicable)

To induce Sovran Bank, N. A. (Bank) to extend credit to _____ (Debtor), the undersigned guarantees payment to the Bank of all direct and indirect obligations of the Debtor to the Bank resulting from the present or future use of the above-mentioned credit card(s).

The undersigned waives notice of acceptance of this Guaranty and of any extensions of credit, initial or renewal, to the Debtor. The undersigned agrees that his duty to pay any indebtedness of the Debtor to the Bank or its assigns is unconditional and shall arise immediately upon demand for payment made upon the undersigned by the Bank. Prior to making such demand for payment upon the undersigned, the Bank shall not be required to make demand upon the Debtor, give notice of default, or pursue any of its rights or remedies against the Debtor or other parties.

The undersigned agrees that the Bank may take or release any security or guaranty for any indebtedness of the Debtor, may surrender documents and may grant renewals or indulgences without releasing the undersigned in any way from the liability for the payment of any such indebtedness.

This Guaranty shall continue until)1) actual receipt by the Bank from the undersigned or his duly qualified personal representative of written notice of its termination and (2) all credit cards issued to Debtor shall have expired or been surrendered to Bank or its agent or a merchant authorized to honor Cards, and the undersigned shall continue to be liable for any indebtedness or liability created prior to the happening of both such events.

DATE: _____ (SEAL)

WITNESS: _____ (SEAL)

FOR BANK PURPOSES ONLY

MasterCard Account Number _____

and / or

Visa Account Number _____

Confidential

Please do not leave any questions unanswered

NAME _____ ADDRESS _____

SOCIAL SECURITY NUMBER _____

BUSINESS _____ ADDRESS _____

This is not an application for credit. The undersigned shall be required to submit to lender additional information at the time of each specific request for credit. The undersigned submits the following as being a true and accurate statement of its financial condition on the following date, and agrees that if any change occurs that materially reduces the means or ability of the undersigned to pay all claims or demands against it, the undersigned will immediately and without delay notify the said Lender, and unless the Lender is so notified it may continue to rely upon the statement herein given as a true and accurate statement of the financial condition of the undersigned as of the close of business.

(MONTH) _____ (DAY) _____ 19 _____

ASSETS				LIABILITIES			
Cash on hand and in Banks				Notes payable to Banks-Secured			
U.S. Gov. Securities-see schedule				Notes payable to Bank-Unsecured			
Listed Securities-see schedule				Notes payable to relatives			
Unlisted Securities-see schedule				Notes payable to others			
Cash Value Life Insurance				Loans payable assigned Life Insurance			
Accounts and Notes Receivable Due from relatives and friends				Accounts and bills due			
				Accrued taxes and interest			
Accounts and Notes Receivable Due from others-good				Other unpaid taxes			
				Mortgages payable on Real Estate-see schedule			
Accounts and Notes Receivable Doubtful				Chattel Obligations— Auto, Appliances, etc.			
Real Estate owned-see schedule				Other debts-itemize			
Real Estate Mortgages owned							
Machinery and Equipment							
Livestock-see schedule							
Automobiles							
Other Assets-see schedule							
				TOTAL LIABILITIES			
				NET WORTH			
TOTAL ASSETS				TOTAL LIAB. & NET WORTH			

Do any of the above assets belong in whole or in part to any other person? Yes _____ No _____
If yes, please explain: _____

If yes, please explain: _____		PERSONAL INFORMATION	
CONTINGENT LIABILITIES		Place of Employment	Age
As endorser, co-maker or guarantor	\$	Position	
On leases or contracts	\$	Partner or officer in any other venture	
Legal claims	\$	No. Dependents	
Provision for Federal Income Taxes	\$		
Alimony or other similar obligations	\$		
Other special debt	\$	I have executed a will <input type="checkbox"/> YES <input type="checkbox"/> NO	

*Income from alimony, child support or separate maintenance payments need not be revealed if you do not wish to have it considered as a basis for repaying credit to be extended by Lender.

credit to be extended by Lender.		GENERAL INFORMATION	
SOURCE OF INCOME*		Are any assets pledged other than indicated above?	
Salary	\$	Are you defendant in any suits or	
Bonus and commissions	\$	legal actions?	
Dividends and Interest	\$	Personal bank accounts carried at	
Real Estate income	\$	Have you ever taken bankruptcy? Explain:	
Other income-itemize*	\$		

TOTAL

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(COMPLETE SCHEDULES AND SIGN ON REVERSE SIDE)



VIRGINIA NATIONAL BANK

FINANCIAL STATEMENT

Approved For Release 2005/06/22 : CIA-RDP85-00375R000400050001-3

Name of Company _____

Address _____

TO: VIRGINIA NATIONAL BANK

For the purpose of procuring credit, direct or contingent, or to lend money on or purchase notes or other instruments of indebtedness from, or executed by, the undersigned, the undersigned represents that the following is a true and accurate statement of the financial condition of the undersigned, ON THE DATE DESIGNATED BELOW and of all facts herein set forth.

DATE OF FINANCIAL STATEMENT _____ 19 _____

ASSETS				LIABILITIES			
Cash On Hand And In Banks				Notes Payable To Banks			
Accounts Receivable (Net)				Notes Payable - Trade			
Notes Receivable (Net)				Notes Payable - Other			
Inventory				Accounts Payable - Trade			
U.S. Govt. Securities				Income Taxes Payable			
Other Current Assets				Accrued Expenses			
				Current Portion-Long Term Debt			
				Due Officers or Partners			
TOTAL CURRENT ASSETS				TOTAL CURRENT LIABILITIES			
Land and Buildings (Net)				Mortgages			
Machinery & Equipment (Net)				Life Insurance Loans			
Due From Officer & Employees				Other Long Term Debt			
Other Receivables							
Investments				TOTAL LIABILITIES			
Cash Value Life Insurance				Capital - Preferred			
Prepaid Expenses							
Other Assets (Specify)				- Common			
				Paid-In Surplus			
				Earned Surplus			
				NET WORTH			
TOTAL ASSETS				TOTAL LIAB. & NET WORTH			

Bank Accounts: Names of Banks	Balance On Deposit	Amount Of Borrowings	Method of Borrowing--Secured Endorsed, Receivables, Etc.

Contingent Liabilities _____

Additional Remarks _____